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TRANSMITTAL UNDER 37 CFR 1.53(b)

ATTORNEY DOCKET 87517RLW Customer No. 01333

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To: Commissioner for Patents

₽.O. Box 1450

Alexandria, VA. 22313-1450

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CORRECTION OF REDEYE DEFECTS IN IMAGES OF HUMANS

First Named Inventor (or Application Identifier):

Andrew C. Gallagher, et al

Express Mail Label No.

EV293528138 US

Date: March 3, 2004



Therew C. Gunagner, et al	
Enclosed are:	
1. X Specification	6. X Assignment of the invention to Eastman Kodak Company
2. 4 Sheet(s) of drawing(s)	7. Certified copy of a priority
3. Information Disclosure Statement Under 37 CFR 1.97.	8. Associate Power of Attorney
 4. Combined Declaration for Patent Application and Power of Attorney: 4a. X New 	
4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)	
5. Incorporation by Reference (useable if Box 4b is	9. <u>Deletion of Inventor(s)</u> .
checked) The entire disclosure of the prior application, from	Signed statement attached deleting inventor(s) named
which a copy of the oath or declaration is supplied under Box 4b,	in the prior application, see 37 CFR 1.63(d)(2) and
is considered as being part of the disclosure of the accompanying	1.33(b).
application and is hereby incorporated by reference therein.	
10. If a 111A application prior to examination of the above	e-identified application, amend the specification at Page 1,
after the title, by inserting the following:	
CROSS REFERENCE TO RELATED APPLICATION	
Reference is made to and priority claimed from U.S. Provisional Application Serial No.,	
filed, entitled.	••
If a CONTINUING APPLICATION , check appropriate box and supply the requisite information:	
11. Continuation Divisional Continuation	-in-part (CIP) of prior application No:
12. X Please address all written communications to Mark G. Bocchetti, Patent Legal Staff,	
Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.	
Please Direct all telephone calls to Robert Luke Walker at (585) 588-2739.	

FOR: NO. FILED NO. EXTRA **RATE** FEE **BASIC FEE** \$ 770 **TOTAL CLAIMS** - 20 = 24 x 18 =\$ 432 INDEPENDENT CLAIMS \$ 258 x 86 =MULTIPLE DEPENDENT CLAIM PRESENTED + 290 \$0 **TOTAL** \$ 1460

X Please charge my Eastman Kodak Company Deposit Account No. <u>05-0225</u> in the amount of \$ 1460

A duplicate copy of this sheet is enclosed

The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u>.

A duplicate copy of this sheet is enclosed.

Attorney for Applicants Registration No. 30,700

Robert Luke Walker/amb Telephone: (585) 588-2739 Facsimile: (585) 477-1148

The filing fee has been calculated as shown below: